

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

DOCUMENT # A95000001667

1. Entity Name  
 AJL, LTD.



**FILED**

2007 APR 11 AM 9:56

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business  
 901 VENETIA BAY BLVD., STE. 300  
 VENICE, FL 34285

Mailing Address  
 901 VENETIA BAY BLVD., STE. 300  
 VENICE, FL 34285



2. Principal Place of Business - No P.O. Box #  
 310 CENTER CT  
 Suite, Apt. #, etc.

3. Mailing Address  
 310 CENTER CT  
 Suite, Apt. #, etc.

04032007 Chg-LP CR2E003 (12/06)

City & State  
 VENICE FL  
 Zip 34285

City & State  
 VENICE FL  
 Zip 34285

4. FEI Number  
 65-0641931

Applied For  
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

RJM OF SARASOTA, INC.  
 901 VENETIA BAY BLVD., STE. 300  
 VENICE, FL 34292

Name

Street Address (P.O. Box Number is Not Acceptable)

310 CENTER CT  
 City VENICE FL Zip Code 34285

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *R. J. Mitchell*

Signature, typed or printed name of registered agent and title if applicable

4-3-07  
 DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2007, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

**13. ADDRESS CHANGES ONLY**

DOCUMENT # P95000082651  
 NAME RJM OF SARASOTA, INC.  
 STREET ADDRESS 901 VENETIA BAY BLVD., STE. 300  
 CITY-ST-ZIP VENICE, FL 34285

STREET ADDRESS 310 CENTER CT  
 CITY-ST-ZIP VENICE, FL 34285

DOCUMENT #  
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 000096792340  
 04/13/07--01039--015 \*\*\$500.00

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 CITY-ST-ZIP

STREET ADDRESS  
 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *R. J. Mitchell*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-3-07 (941) 497-6020  
 Date Daytime Phone #

STAPLE CHECK HERE